

FEE TRANSMITTAL

Electronic Version v08

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Title of Invention	Organizer																																
Application Number : Date : First Named Applicant: Mrs. Diana C. Peterson Attorney Docket Number: 2240102220003																																	
TOTAL FEE AUTHORIZED \$ 385 Patent fees are subject to annual revisions on or about October 1st of each year.																																	
Filing as small entity BASIC FILING FEE <table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="4">Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table> EXTRA CLAIM FEES <table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 7</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims : 3</td><td>0</td><td>2201</td><td>43</td><td>0</td></tr><tr><td colspan="5">Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table>		Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385	Subtotal For Basic Filing Fees: \$ 385				Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 7	0	2202	9	0	Independent Claims : 3	0	2201	43	0	Subtotal For Extra Claims Fees: \$ 0				
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AUTHORIZED BILLING INFORMATION The commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit account number: 500356 Access Code **** Deposit name: A+ LEGAL SERVICES Deposit authorized name: Michael L. Greenberg Signature: mlg Date (YYYYMMDD): 2004-05-04 Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.																																	